

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SL</i>		<i>2-15-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>ST</i>	<i>257</i>	<i>4/19/01</i>
RESPONSE FORMALITY REVIEW	<i>SG</i>	<i>1077</i>	<i>8/6/01</i>

*8
4-1801*

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

5-2-27